PTO/SB/17 (10-08) Approved for use through 06/30/2010, OMB 0651-0032

Under the Paperwo	rk Reduction Act of 19	95 no persons are	required to re	espond to a collecti	on of information unle	es it displays a	valid OMB control number	
Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Complete if Known				
				Application Nu	mber 10/777,68	55	Conf. No.: 5625	
FEE TRANSMITTAL For FY 2009 Applicant claims small entity status. See 37 CFR 1.27				Filing Date February 13, 2004				
				First Named Inventor Youn		g Jae JEON		
				Examiner Nam	Examiner Name G. J. MADAMBA			
			Art Unit	2451				
TOTAL AMOUNT OF PAYMENT (\$) 180.0	0	Attorney Dock	et No. 0465-114	8P		
METHOD OF PAYMENT (check all that apply)								
Check Credit Card Money Order None Other (please identify):								
Deposit Account Deposit Account Number: 02-2448 Deposit Account Name:								
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)								
✓ Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee								
✓ Charge any additional fee(s) or underpayments of fee(s) ✓ Credit any overpayments WARNING: Information on this form say become public. Credit eard information about not be included on this form. Provide credit card information and subtrictation on PTO-2028.								
FEE CALCULA	TION							
BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES								
Application To	/pe Fee (\$)	Small Entity Fee (\$)	Fee (\$	Small Entity Fee (\$)		Entity e (\$)	Fees Paid (\$)	
Utility	330	165	540	270	_	10		
Design	220	110	100	50	140	70	1	
Plant	220	110	330	165		85		
Reissue	330	165	540	270		25		
Provisional	220	110	0	0	0	0		
2. EXCESS CLAIM FEES Small Entity Fee Obscription Fee (5)								
Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues)						52 220	26 110	
Multiple dependent claims over 3 (including Reissues)						390	195	
Total Claims Extra Claims Fee (\$) Fee Paid (\$)					N.		ndent Claims	
	or HP = 0	x		0.00		Fee (\$)	Fee Paid (\$)	
Indep. Claims	ber of total claims paid Extra Cla	ims Fee (\$) <u>Fee</u>	Paid (\$)	-			
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer								
listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50								
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) - 100 = 0 / 50 = 0 (round up to a whole number) x = 0.00								
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Fees Paid (\$)								
Other (e.g., late filing surcharge): 1806 Submission of an IDS \$180.00								
SUBMITTED BY								
Signature	Ett	un(l	rine	Registration No. (Attorney/Agent)	40953	Telephone	703-205-8000	
lame (Print/Type)	Sther H. Chong		Date May 14, 2010					

This collection of information is required by 37 CFR 1,138. The information is required to obtain or retain a brnefit by the public which is to file (and by the USFTO) to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1,14. This collection is estimated to take 30 minutes to complete underlying personal process, and application. For the USFTO, The work law yet generaling and submitting the completed application from the USFTO. The will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Civil Information Officer, U.S. Patent and Trademark Office. U.S. Department of Commence, P.O. Sox 1450, Alexandria, VA 22313-1450. DIN OTS END FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the rome, and 1-80-07-09-199 and select option 2.